

No. XXIV.—A NEW COLOUR VARIETY OF MACCLELLAND'S CORAL SNAKE (*CALLOPHIS MACCLELLANDI*) AND EXTENSION OF THE HABITAT OF THIS SPECIES.

Mr. Millard has submitted to me a very interesting specimen of this snake from Kasauli. Hitherto the species has only been known from the Eastern part of the Himalayas.

It constitutes a very distinct colour variety for which I propose the name *nigriventer*. It differs from *univirgatus*, the variety peculiar to the Eastern Himalayas, in having no trace of black rings, except on the tail where there are three, each being wholly imperfect on the left side. Further there is a continuous broad black irregularly outlined band, running down the middle of the belly. The snake is otherwise exactly similar to *univirgatus* in colour and lepidosis. The ventrals are 232, and the subcaudals 28.

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DIBRUGARH, ASSAM, 14th October 1908.

No. XXV.—NOTES ON TWO CASUALTIES FROM THE SAWSCALED VIPER (*ECHIS CARINATA*).

CASE 1.

Thanks to letters from Colonel Russell, R.A.M.C., and Mr. C. A. Owen, I am able to put on record an instructive case of *Echis* toxæmia which ended fatally.

The bitten subject was a muscular male European, aged 47, total abstainer, and non-smoker, and in excellent health. He was bitten at 10 a.m. on the 15th August 1908 at Rawal Pindi, wounds being inflicted on the fingers and back of the right hand and the back of the left hand. He went "at once" to the Station Hospital where the wounds were "freely incised" and crystals of permanganate of potash then rubbed in. Antivenene was then injected subcutaneously. He had no symptoms that day up till 5 p.m. when he left Hospital at his own request.

On the 16th at 6 p.m. his wounds began to bleed spontaneously, and he discharged blood in his urine, and by the bowel.

He was readmitted into the Station Hospital where his pulse, respiration, and temperature were found to be normal. His tongue however was swollen and discoloured, and his right arm too up to the shoulder. He passed blood in his urine, and also from the bowel. He was given internally Calcium Chloride, Adrenalin Chloride, and Ergot.

On the 19th he had severe vomiting necessitating feeding, and medication by the bowel, but his bleedings had reduced, and his general state was reported quite good. He complained only of pain in his hands.

He continued to improve, and the bleeding diminished until the 21st (the 7th day after the bites) no blood appearing then in the stools. At 4 p.m. that day however he suddenly collapsed, became delirious, and then comatose. He was